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**Complete if Known**

## Application Number

**Filing Date****First Named Inventor****Art Unit**

**Examiner Name**

Attorney Docket Number

~~10/520728~~

**Casimir Johan Crawley**

**(Use as many sheets as necessary)**

Sheet	1	of	2
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[illegible][illegible]

Date Considered

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Substitute for form 1449B/PTO

# INFORMATION DISCLOSURE STATEMENT BY APPLICANT

**(Use as many sheets as necessary)**

Sheet	2	of	2
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**Application Number**

**Filing Date**

***First Named Inventor***

**Casimir Johan Crawley**

**Art Unit**

**Examiner Name**

Attorney Docket Number

**PU020286**

## NON PATENT LITERATURE DOCUMENTS

[illegible]

**Examiner  
Signature**

Date  
Considered

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

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